

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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|-----------------------------|---|---|
| In re Patent Application of |) | MAIL STOP RCE |
| |) | |
| Hilmar Meek Warenius |) | Group Art Unit: 1642 |
| |) | |
| Application No.: 10/508,873 |) | Examiner: Mark Halvorson |
| |) | |
| Filed: December 6, 2004 |) | Confirmation No.: 1109 |
| |) | |
| For: TREATING CANCER |) | |
| |) | |
| |) | Certificate of Electronic Deposit |
| |) | I hereby certify that this correspondence is being |
| |) | deposited with the United States Patent & Trademark |
| |) | Office on June 22, 2010 via EFS-Web. |
| |) | By: <u> /Joseph R. Baker, Jr./</u> |
| | | Joseph R. Baker, Jr. |

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a Response for the above-identified patent application.

- ☒ A Petition for Extension of Time is enclosed.
- ☐ _____ Terminal Disclaimer(s) and the ☐ \$ 65 ☐ \$ 130 fee per Disclaimer due under 37 C.F.R. § 1.20(d) are enclosed.
- ☒ Also enclosed is/are: Affidavit under 1.132
- ☒ Small entity status is hereby claimed.
- ☒ Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☒ \$ 405 ☐ \$ 810 fee due under 37 C.F.R. § 1.17(e).

- ☒ No additional claim fee is required.
- ☐ An additional claim fee is required, and is calculated as shown below:

| AMENDED CLAIMS | | | | | |
|--|---------------|---|--------------|-----------------|----------------|
| | No. of Claims | Highest No. of Claims Previously Paid For | Extra Claims | Rate | Additional Fee |
| Total Claims | 20 | 20 | 0 | x \$ 50 (1202) | \$ 0 |
| Independent Claims | 3 | 3 | 0 | x \$ 210 (1201) | 0 |
| <input type="checkbox"/> If Amendment adds multiple dependent claims, add \$ 370 (1203) | | | | | \$ 0 |
| Total Claim Amendment Fee | | | | | \$ 0 |
| <input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee | | | | | 0 |
| TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT | | | | | \$ 0 |

- ☐ Charge \$ _____ to Deposit Account No. 50-4586 for the fees due.
- ☐ A check in the amount of _____ is enclosed for the fee due.
- ☒ Charge \$650.00 to credit card for the fee due for the RCE fee and Extension of Time.

Respectfully submitted,

GAVRILOVICH, DODD & LINDSEY LLP

Date June 22, 2010

By: /Joseph R. Baker, Jr./
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